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Date					
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PARTICIPANT ID:

**NORTHERN CALIFORNIA
BREAST CANCER FAMILY REGISTRY
PROXY QUESTIONNAIRE
MALE
Living or Deceased**

CENTER ID:

FAMILY ID:

DATE OF DIAGNOSIS:

MO DAY YEAR

INTERVIEWER: _____

DATE OF INTERVIEW:

MO DAY YEAR

STARTING TIME OF INTERVIEW

AM 1
HR MIN PM 2

TYPE OF INTERVIEW:

IN-PERSON 1 PHONE 2

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11/25/97

SECTION A. BACKGROUND INFORMATION

I would like to begin by asking you some questions about his background.

A1. How old was he (on his last birthday/when he passed away)?

AGE

A2. What is his date of birth?

MO DAY YEAR

A3. IDENTIFY SEX OF PARTICIPANT

MALE 1
FEMALE 2

A4. (Is he currently.../Was he...)

Married or living as married 1
Widowed 2
Divorced 3
Separated 4
Never married 5
DK 9

A5. Which of the following choices best describes his race or ethnic background?
(SHOW CARD B, CIRCLE AS MANY AS APPLY)

White, non Hispanic 1
White, Hispanic 16
African-American or Black, non Hispanic 2
African-American or Black, Hispanic 17
Native American 3
Chinese 4
Japanese 5
Filipino 6
Hawaiian 7
Korean 8
Asian Indian or Pakistani 9
Vietnamese 10

OTHER (SPECIFY) _____

_____ 88

DK 99

A6. In what country was he born? _____

A7. In what country was his mother born? _____

A8. His mother's mother? _____

A9. His mother's father? _____

A10. In what country was his father born? _____

A11. His father's mother? _____

A12. His father's father? _____

A13. Which of the following religions was he born into? **(SHOW CARD D, READ CHOICES)**

Protestant	1
Catholic	2
Buddhist	3
Ashkenazi Jewish	4
Sephardic Jewish	5
Other or uncertain Jewish	6
Hindu	7
Eastern Orthodox	8
Muslim	9
Mormon	10
Seventh Day Adventist	11
None	12

OTHER (SPECIFY)

_____ 13

DK 99

SECTION B. MEDICAL HISTORY

The next section asks questions about certain medical conditions.

B1. Has a doctor ever told him that he had cancer, leukemia or a malignant tumor?

YES 1
NO 2 GO TO B9.
DK 9 GO TO B9.

IF YES:

	CANCER #1	CANCER #2	CANCER #3
B2. What type of cancer did he have?			
B3. How old was he when this cancer was <u>first</u> diagnosed?			
	AGE	AGE	AGE
B4. In what year was he diagnosed with this cancer?			
B5. In what city and state was he diagnosed?			
B6. What is the name of the hospital or clinic where he			

was diagnosed?			
B7. What is the address of that hospital or clinic where he was diagnosed?			
B8. What is the name of the physician who made the diagnosis?			
PROBE FOR OTHER CANCERS			

B9. Has he ever had a breast completely removed?

YES	1
NO	2 GO TO C1.
DK	9 GO TO C1.

IF YES:

B10. Did he have his right or left breast removed?

RIGHT ONLY	1
LEFT ONLY	2
BOTH	3

B11. How old was he when he had his breast(s) removed?

RIGHT	AGE
LEFT	AGE

SECTION C. HEIGHT AND WEIGHT

Now I have some questions about his height and weight, alcohol consumption and cigarette smoking.

C1. How tall (is/was) he? FEET . INCHES

. CMS

C2. What (is his current weight/was his weight)? . LBS.

. KGS

SECTION D. ALCOHOL

D1. Has he ever consumed any alcoholic beverages, such as beer, wine, or liquor at least once a week for 6 months or longer?

YES	1
NO	2 GO TO E1.
DK	9 GO TO E1.

SECTION E. SMOKING

E1. Has he ever smoked at least 1 cigarette a day for 3 months or longer?

YES	1
NO	2 GO TO F1.
DK	9 GO TO F1.

SECTION F. TWIN STATUS AND CANCER TRIALS

The next question will complete this interview.

F1. (Is/Was) he a twin?

YES	1
NO	2 END
DK	9 END

IF YES:

F2. Non-identical twins are no more alike physically than ordinary brothers and sisters. Genetically identical twins, on the other hand, have a strong resemblance to each other in height, coloring, features of the face, etc. They look so much alike that people often mistake one for the other, especially during their childhood.

Do you think he and his twin (are/were) identical?

YES	1
NO	2 END
DK	9 END

END: Thank you very much for taking the time to complete this interview.

TIME INTERVIEW COMPLETED:

AM	1		
HR	MIN	PM	2

INTERVIEWER ASSESSMENT

1. PARTICIPANT'S COOPERATION WAS

VERY GOOD		1
GOOD	2	
FAIR		3
POOR		4

2. THE OVERALL QUALITY OF THIS INTERVIEW IS

HIGH QUALITY	1	
GENERALLY RELIABLE	2	
QUESTIONABLE		3
UNSATISFACTORY		4

3. WERE THERE ANY DISTRACTIONS DURING THE INTERVIEW

YES		1
NO		2

IF YES:

DESCRIBE _____
